

09/555339

ISSUE SHEET STATUS AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

BEST AVAILABLE COPIES

## INDEX OF CLAIMS

✓ Rejected N Non-elected  
 = Allowed I Interference  
 - (Through numeral) Canceled A Appeal  
 + Restricted O Objected

Claim	Date
Final	
Original	
1	10/29/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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